

**Cape May County  
Department of Transportation  
Certification Application  
(for persons under 60 )**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone #: (\_\_\_\_\_)\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Telephone #: (\_\_\_\_\_)\_\_\_\_\_

**Income Eligible Information:**

A. Total Gross Wages/Salaries: \_\_\_\_\_

B. Income from Self-Employed: \_\_\_\_\_

C. Gross income from interest,  
Income/dividends/trusts: \_\_\_\_\_

D. Gross income from Pensions: \_\_\_\_\_

E. Social Security payments (all types): \_\_\_\_\_

F. Unemployment and/or Workers Comp.: \_\_\_\_\_

G. Alimony/child support: \_\_\_\_\_

H. Other income: \_\_\_\_\_

Total family income per month: \_\_\_\_\_

Family Size: \_\_\_\_\_

**Applicants Signature:** \_\_\_\_\_

**Please return this application to:**

**Cape May County  
Department of Transportation  
4 Moore Road  
Cape May Court House, NJ 08210-1601**